

Signature Jay Reese

Post Office Box 7068
Pasadena, CA 91109-7068
November 18, 2009

Enclosed is an amendment to the above-identified application.

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims Fee	21	*20	1	0 x \$26.00	1 x \$52.00	52.00
Independent Claims	4	** 4	0	0 x \$110.00	0 x \$220.00	0
Multiple Dependent Claims ***				\$195.00	\$390.00	0
TOTAL FILING FEE						0
NO ADDITIONAL FEE REQUIRED	IF NO FEE REQUIRED, INSERT "0"					0
LIST INDEPENDENT CLAIMS: 1, 3, 7, and 17						

Amendment Transmittal Letter
Application No. 10/747,774

* IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3
** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3
*** PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST
TIME


X Charge Deposit Account No. 03-1728 \$52.00 to pay the fees calculated above.
_____ A Petition for Extension of Time and the required fee are enclosed.
_____ Other enclosures: none

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account.

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By



Lauren E. Schneider
Reg. No. 63,712
626/795-9900

LES/jr

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